



I023068

The information herein is being provided in accordance with FIFRA section 6(a)(2)

22 July 2011

Document Processing Desk – 6(a)(2)
Office of Pesticide Programs
Document Processing Room S-4900
One Potomac Yard
2777 S. Crystal Drive
Arlington, VA 22202

Subject: Virbac Animal Health (2382)
FIFRA Section 6(a)(2) Adverse Effects Reporting
June 2011 Human Single Incident Reports

Dear EPA,

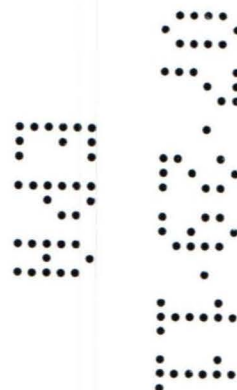
In accordance with 40 CFR 159 Subpart D, Section 159.156 & 159.184, Virbac Animal Health herewith submits the following (3) HUMAN SINGLE INCIDENT REPORTS IN ACCORDANCE WITH FIFRA Section 6 (a)(2).

If you have any questions concerning this report of adverse effects, please do not hesitate to contact me at 1-800-338-3659, ext. 3562 or sara.lucido@virbacus.com.

Sincerely,

Sara Lucido
Veterinary Technical Product Support

Cc: Alabama Department of Agriculture and Industries
California Department of Pesticide Regulation
Florida Department of Agriculture and Consumer Service
Georgia Department of Agriculture
Hawaii Department of Agriculture
Kentucky Department of Agriculture
Maine Department of Agriculture
Michigan Department of Agriculture
New Jersey Pesticide Control Program
New York State Department of Environmental Conservation
Washington State Department of Agriculture



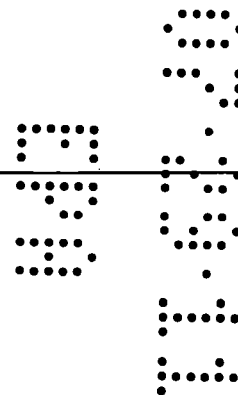
Enclosures

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area. Page # 1 of 3

- 001

Row 1 Administrative Data	Reporter name: *Personal privacy information* [REDACTED]	Submission date: 07/22/2011	Contact person (if different than reporter)	Internal ID 1-26630980
	Address: Ohio	Address:		
	Phone #: [REDACTED]	Phone #:		
	Incident Status: New	Location and date of incident Ohio 06/27/2011	Date registrant became aware of incident: 6/27/2011	Was incident part of larger study?
Row 2 Pesticide(s) Involved	EPA Registration # (Product 1) 2382-183	EPA Registration # (Product 2)	EPA Registration # (Product 3)	
	A.I. (s) Pyriproxyfen, Tetramethrin*	A.I. (s)	A.I. (s)	
	Product 1 Name Knockout Area Treatment 14 oz	Product 2 Name	Product 3 Name	
	Exposed to concentrate prior to dilution? NA	Exposed to concentrate prior to dilution?	Exposed to concentrate prior to dilution?	
	Formulation	Formulation	Formulation	
Row 3 Incident Circumstances	Evidence label directions were not followed? Yes Intentional misuse? No	Incident site: (examples include home, yard, school, industrial, nursery/greenhouse, surface water, commercial turf, building/office, forest/ woods, agricultural (specify crop) right-of-way (rail, utility, highway)) Own Residence		Situation: (act of using product): (examples include mixing/loading, reentry, application, transportation, repair/ maintenance of application equipment, manufacturing/ formulating) See Description Notes
	Applicator certified PCO? Not applicable			
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff) See Incident Description			



6/27/2011 8:06:17 PM ASPCA transferring (Jennifer)

**Knock Out
EPA reg 2382-183**

Hx: The caller's husband applied this very heavily through out the home, earlier today. The product application has created a strong smell, and both the caller and her daughter have been experienced nausea while inhaling that odor for the last 6 hours. Six hours ago, the caller's daughter (who has pre-existing bronchitis and asthma) may have drank from a glass that had some product residue on it. Upon drinking from the glass, she passed out, fell down and hit her lip, at that time. At some point in time, she received treatment with her inhaler, because she couldn't breathe. They called the EMTs who evaluated her and said that since her blood pressure was fine, that nothing needed to be done. Her pulse was 110. According to the caller, her daughter feels like she is having a seizure right now. (I can hear her talking and coughing, in the background.) She has an MDs appointment for a regular PE tomorrow, so she won't take her in tonight (despite my recommendations and her mention of an ongoing seizure).

NOTE: The caller's story seems to escalate with each iteration. They have not removed themselves from the odor, at any time, apparently.

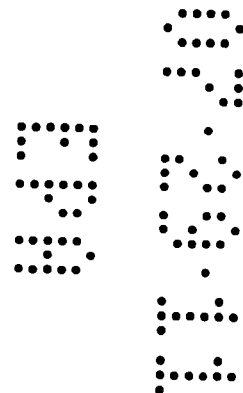
Resp: Overuse of the product in a poorly-ventilated area could create a respiratory irritant situation and/or odor effects that would be expected to resolve in fresh air, like headache, nausea and/or dizziness. Those with pre-existing asthma could have more pronounced respiratory symptoms. The residual ingestion would not be expected to cause anything more than simple GI upset. The loss of consciousness and/or seizure are much more severe than any effect that would be anticipated from mere product odor or minor residual ingestion. If you believe that you daughter is having a seizure, than she needs to be re-evaluated by HCPs right now. Remove yourselves from the odor, if any are having persistent symptoms attributed to this odor, and stay out until it has been ventilated away.

The caller asked for the ingredients, and I provided them to her, for discussion with her MD tomorrow.

6/28/2011 9:09:20 AM Reviewed

6/30/2011 9:41:59 AM PROSAR CB#1 - LM on VM with case# and CB#. Reset CB.

7/1/2011 1:25:57 PM PROSAR CB#2 - LM on VM with case# and CB#. Closed case.



Voluntary Industry Reporting Form for 6(a)(2) Incident Information Involving Humans

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area. Page # 3 of 3

Demographic information Age: <i>16 Years</i> Sex: <i>Female</i> Occupation: (if relevant)	Exposure route: <i>Inhalation Ingestion</i>	Was adverse effect result of suicide/homicide or attempted suicide/homicide? <i>No</i>	Was protective clothing worn (specify)? <i>Not applicable</i>
If female, pregnant? <i>Did not query</i>	Was exposure occupational? <i>No</i> If yes, days lost due to illness:	Time between exposure and onset of symptoms: <i>See Symptoms</i>	
Type of medical care sought: (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient). <i>On-site</i>	List signs/symptoms/adverse effects. <i>Other Cardiovascular - pulse was 110, 6 hrs or less; Nausea, 15 min or less; Loss of consciousness, 6 hrs or less; Other Neurological - patient feels like she is having a seizure, 6 hrs or less; Cough, Unable to determine; Shortness of breath, 15 min or less;</i>	If lab tests were performed, list test names and results (If available, submit reports). <i>Not Reported</i>	
Exposure data: Amount of pesticide: Exposure duration: Weight:			
Human severity category: <i>HC</i>			

This box can be used to provide any explanatory or qualifying information surrounding the incident. (add additional pages if necessary)

